

**BCC NAME****INDIAN GAMING LOCAL COMMUNITY BENEFIT COMMITTEE****COUNTY DEPARTMEN**

County Administrative Office

**CONTACT PERSON**

Chantal Saipe-Tribal Li

**PHONE NUMBER**

619 685-2542

**MAILSTOP**

MS A-6

**FAX NUMBER**

619 531-5476

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<b>MEMBER NAME</b>	Barrett, Alan				
<b>APPOINTMENT</b>	1/12/2005	<b>MO#</b>	12	<b>EXPIRATION</b>	<b>TERM</b> 4 Years
<b>NOMINATED BY</b>	Tribal Representative			<b>APPOINTED BY</b>	Tribal Representative
<b>REQUIREMENT</b>	Tribal Representative			<b>COMMENTS</b>	Council Member of Viejas Band of Kumeyaay Indians

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<b>MEMBER NAME</b>	Day, Adam				
<b>APPOINTMENT</b>	1/12/2005	<b>MO#</b>	12	<b>EXPIRATION</b>	<b>TERM</b> 4 Years
<b>NOMINATED BY</b>	Tribal Representative			<b>APPOINTED BY</b>	Tribal Representative
<b>REQUIREMENT</b>	Tribal Representative			<b>COMMENTS</b>	Assistant Tribal Manager

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<b>MEMBER NAME</b>	Jacob, Dianne (Chairwoman)				
<b>APPOINTMENT</b>	1/12/2005	<b>MO#</b>	12	<b>EXPIRATION</b>	<b>TERM</b> 4 Years
<b>NOMINATED BY</b>	County Representative- District 2			<b>APPOINTED BY</b>	Board of Supervisors
<b>REQUIREMENT</b>	County Representative			<b>COMMENTS</b>	

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<b>MEMBER NAME</b>	Kolender, William				
<b>APPOINTMENT</b>	1/12/2005	<b>MO#</b>	12	<b>EXPIRATION</b>	<b>TERM</b> 4 Years
<b>NOMINATED BY</b>	County Representative-Sheriff			<b>APPOINTED BY</b>	Board of Supervisors
<b>REQUIREMENT</b>	County Representative-Sheriff			<b>COMMENTS</b>	

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<b>MEMBER NAME</b>	Lewis, Mark				
<b>APPOINTMENT</b>	1/12/2005	<b>MO#</b>	12	<b>EXPIRATION</b>	<b>TERM</b> 4 Years
<b>NOMINATED BY</b>	City of El Cajon Representative			<b>APPOINTED BY</b>	City of El Cajon Representative
<b>REQUIREMENT</b>	City of El Cajon Representative			<b>COMMENTS</b>	Mayor of El Cajon

Friday, December 07, 2007

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**MEMBER NAME**

Romero, Edwin

**APPOINTMENT**

1/12/2005

**MO#**

12

**EXPIRATION****TERM**

4 Years

**NOMINATED BY**

Tribal Representative

**APPOINTED BY**

Tribal Representative

**REQUIREMENT**

Tribal Representative

**COMMENTS**

Council Member of Barona Band of Mission Indians

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**MEMBER NAME**

Smith, Greg

**APPOINTMENT**

1/12/2005

**MO#**

12

**EXPIRATION****TERM**

4 Years

**NOMINATED BY**

County Representative

**APPOINTED BY**

Board of Supervisors

**REQUIREMENT**

County Representative

**COMMENTS**